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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing    OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)))	<b>Attorney Dock t Numb r</b>	<b>B0023-US01</b>
	<b>First Named Inventor</b>	<b>HLAVINKA, et al.</b>
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	<b>10 / 005431</b>
	<b>Filing Date</b>	<b>11/02/2001</b>
	<b>Group Art Unit</b>	<b>1724</b>
	<b>Examiner Name</b>	<b>Not yet assigned</b>

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**FLUID SEPARATION DEVICES, SYSTEMS AND/OR METHODS USING A FLUID PRESSURE DRIVEN AND/OR BALANCED CONFIGURATION**

the specification of which (Title of the Invention)

☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) **11/02/2001** as United States Application Number or PCT International

Application Number **10/005431** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above:

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application	Foreign Filing Date	Priority	Certified Copy Attached?	
			YES	NO
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

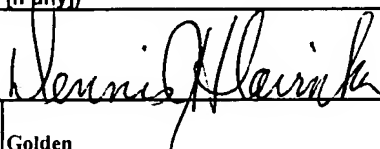
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
<b>60/245282</b>	<b>11/02/2000</b>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	24994	OR <input type="checkbox"/>	Correspondence address below
<b>Name</b> Gambro, Inc.					
<b>Address</b> 10810 W. Collins Ave.					
<b>Address</b>					
<b>City</b> Lakewood			<b>State</b> CO	<b>ZIP</b> 80215-4439	
<b>Country</b> USA		<b>Telephone</b> 303-205-2560		<b>Fax</b> 303-231-4198	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
<b>NAME OF SOLE OR FIRST INVENTOR :</b>			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
<b>Given Name</b> (first and middle [if any]) Dennis J.			<b>Family Name</b> or Surname HLAVINKA		
<b>Inventor's Signature</b> 				<b>Date</b> 1/15/02	
<b>Residence: City</b> Golden		<b>State</b> CO	<b>Country</b> U.S.A.		<b>Citizenship</b> U.S.A.
<b>Mailing Address</b> 7365 North Salvia Court					
<b>Mailing Address</b>					
<b>City</b> Golden		<b>State</b> Colorado	<b>ZIP</b> 80419	<b>Country</b> U.S.A.	
<b>NAME OF SECOND INVENTOR:</b>			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
<b>Given Name</b> (first and middle [if any]) Thomas J.			<b>Family Name</b> or Surname FELT		
<b>Inventor's Signature</b>				<b>Date</b>	
<b>Residence: City</b> Boulder		<b>State</b> CO	<b>Country</b> U.S.A.		<b>Citizenship</b> U.S.A.
<b>Mailing Address</b> 4210 Evans Drive					
<b>Mailing Address</b>					
<b>City</b> Boulder		<b>State</b> Colorado	<b>ZIP</b> 80303	<b>Country</b> U.S.A.	
<input type="checkbox"/> Additional inventors are being named on _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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	<b>Filing Date</b>	11/02/2001
	<b>Group Art Unit</b>	1724
	<b>Examiner Name</b>	Not yet assigned

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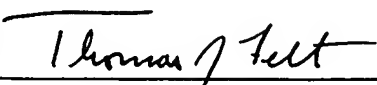
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60/245282	11/02/2000

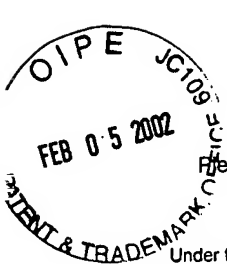
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
<b>NAME OF SOLE OR FIRST INVENTOR :</b>			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
<b>Given Name</b> (first and middle [if any]) Dennis J.			<b>Family Name</b> or Surname HLAVINKA		
<b>Inventor's Signature</b>					<b>Date</b>
<b>Residence: City</b> Golden		<b>State</b> CO		<b>Country</b> U.S.A.	
<b>Citizenship</b> U.S.A.					
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<b>City</b> Golden		<b>State</b> Colorado		<b>ZIP</b> 80419	
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<b>NAME OF SECOND INVENTOR:</b>			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
<b>Given Name</b> (first and middle [if any]) Thomas J.			<b>Family Name</b> or Surname FELT		
<b>Inventor's Signature</b> 					<b>Date</b> 2/1/02
<b>Residence: City</b> Boulder		<b>State</b> CO		<b>Country</b> U.S.A.	
<b>Citizenship</b> U.S.A.					
<b>Mailing Address</b> 4210 Evans Drive					
<b>Mailing Address</b>					
<b>City</b> Boulder		<b>State</b> Colorado		<b>ZIP</b> 80303	
				<b>Country</b> U.S.A.	
<input type="checkbox"/> Additional inventors are being named on _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/005431
Filing Date	11/02/2001
First Named Inventor	HLAVINKA, et al.
Group Art Unit	1724
Examiner Name	Not yet assigned
Attorney Docket Number	B0023-US01

I hereby appoint:

☒ Practitioners at Customer Number

24994

OR

☐ Practitioner(s) named below:



Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name

Dennis J. Hlavinka

Signature

Date

11/15/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☒ \*Total of 1 forms are submitted.

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### SIGNATURE of Applicant or Assignee of Record

Name

Thomas J. Felt

Signature

*Thomas J. Felt*

Date

2/01/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

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